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Application Number	10/542,469
Filing Date	01/05/2006
First Named Inventor	
Title	
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

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Practitioner(s) Name	Registration Number
Arthur A. Gardner	33,887
Bradley K. Groff	39,695
John W. Greenwald	41,803
Lawrence A. Villanueva	43,968

Please recognize or change the correspondence address for the above-identified application to:

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<input checked="" type="checkbox"/> Firm or individual Name	Gardner Groff Greenwald & Villanueva, P.C.		
Address	2018 Powers Ferry Road		
City	Atlanta	State	GA
Country	USA	Zip	30339
Telephone	770-984-2300	Email	patent@gardnergroff.com

I am the:

Applicant/Inventor.

OR

Assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) (Form PTO/SB/66) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature	Date
Name	Telephone
Title and Company	THOMAS ZORI GARCIA

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of 1 forms are submitted.

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